| PATENT APPLICATION FEE DETERMINATION RECOI                               |   |   |                                   |                                |                           |                                      |            | Application or Docket Number 3/98.1 |      |                        |       |                               |                        |
|--|---|---|-----------------------------------|--------------------------------|---------------------------|--------------------------------------|------------|-------------------------------------|------|------------------------|-------|-------------------------------|------------------------|
| CLAIMS AS FILED - PART I (Column 1) (Column 2)                           |   |   |                                   |                                |                           |                                      |            | SMALL ENTITY TYPE                   |      | VTITY                  | OR    | OTHER<br>SMALL                |                        |
| TOTAL CLAIMS   |   |   | 14                                |                                |                           |                                      |            | RATE                                |      | FEE                    | 1     | RATE                          | FEE                    |
| FOR  |   |   | NUMBER FILED                      |                                | NUMBER EXTRA              |                                      |            | BASIC FEE 3                         |      | 355.00                 | OR    | BASIC FEE                     | 710.00                 |
| TOTAL CHARGEABLE CLAIMS  |   |   | / 4 minus 20=                     |                                | · Ø                       |                                      |            | X\$ 9=                              |      |                        | OR    | X\$18=                        |                        |
| INDEPENDENT CLAIMS   |   |   | ج minus 3 =                       |                                | 0                         |                                      |            | X40=                                |      |                        | OR    | X80=                          |                        |
| MULTIPLE DEPENDENT CLAIM P   |   |   | RESENT                            | ···                            |                           | +135                                 |            |                                     |      |                        | OR    | +270=                         |                        |
| * If the difference in column 1 is less than zero, enter "0" in column 2 |   |   |                                   |                                |                           | l                                    | TOTA       |                                     |      | OR                     | TOTAL | 710                           |                        |
| 2\ . CLAIMS AS AMENDED - PART II   |   |   |                                   |                                |                           |                                      |            |                                     |      | <u> </u>               | 4     | OTHER                         |                        |
| CLAIMS HIGHEST (Column 3)  |   |   |                                   |                                |                           |                                      |            | SMAI                                | LL   | ENTITY                 | OR    | SMALL                         | ENTITY                 |
| AMENDMENT A  |   | CLAIMS<br>REMAINING<br>AFTER<br>AMENDMENT   |                                   | NUM<br>PREVIO<br>PAID          | BER<br>OUSLY              | PRESENT<br>EXTRA                     |            | RATE                                | =    | ADDI-<br>TIONAL<br>FEE |       | RATE                          | ADDI-<br>TIONAL<br>FEE |
| NON<br>NON   | Total   | . 8   | Minus                             | ·a                             | 0                         | <b>₹</b> //                          |            | X\$ 9                               |      |                        | OR    | X\$18=                        |                        |
| AME  | Independent   | · 3   | Minus                             | ***                            | 3                         | -                                    |            | X40=                                | -    |                        | OR    | X80=                          |                        |
| L  | FIRST PRESE   | NTATION OF MI   | JLTIPLE DEF                       | PENDENT                        | CLAIM                     |                                      | ]          | +135                                | _    |                        | OR    | +270=                         |                        |
|  |   |   |                                   |                                |                           |                                      | l          | 101                                 |      | `                      | OA    | TOTAL                         | -                      |
|  | (Column 1) (Column 2) (Column   |   |                                   |                                |                           |                                      |            | ADDIT. F                            | EE   |                        | ]     | ADDIT. FEEI                   |                        |
| AMENDMENT B  |   | CLAIMS<br>REMAINING   |                                   | HIGH                           | EST                       |                                      | 1          |                                     | 7    | ADDI-                  | 1     |                               | ADDI-                  |
|  |   | AFTER<br>AMENDMENT  |                                   | PREVIO<br>PAID                 | DUSLY                     | PRESENT<br>EXTRA                     |            | RATE                                |      | TIONAL<br>FEE          |       | RATE                          | TIONAL<br>FEE          |
|  | Total   | •   | Minus                             | ·20                            | 2                         | =                                    | ] [        | X\$ 9=                              | -    |                        | OR    | X\$18=                        |                        |
|  | Independent   | NITATION OF M   | Minus                             | OHO Z                          | 3                         | <u> -</u>                            |            | X40=                                |      |                        | OR    | X80=                          |                        |
| FIRST PRESENTATION OF MULTIPLE DEPENDENT CLAIM                           |   |   |                                   |                                |                           |                                      | <b>,</b> [ | +135=                               |      |                        | OR    | +270=                         |                        |
|  |   |   |                                   |                                |                           |                                      | L          | TOT                                 |      |                        | OR    | TOTAL<br>ADDIT. FEE           |                        |
| (Column 1) (Column 2) (Column 3)   |   |   |                                   |                                |                           |                                      |            | ADDIT. PI                           | EC 4 | · · · · · · · · ·      | ,     | ADDII. FEE                    |                        |
| AMENDMENT C  |   | CLAIMS<br>REMAINING<br>AFTER<br>AMENDMENT   |                                   | HIGH<br>NUMI<br>PREVIO<br>PAID | EST<br>BER<br>DUSLY       | PRESENT<br>EXTRA                     |            | RATE                                |      | ADDI-<br>TIONAL<br>FEE |       | RATE                          | ADDI-<br>TIONAL<br>FEE |
|  | Total   | •   | Minus                             | ••                             |                           | 3 '                                  | <b>1</b>   | X\$ 9=                              | _    |                        | OR    | X\$18=                        |                        |
|  | Independent   | •   | Minus                             | ***                            |                           | =                                    | 1 F        |                                     | +    |                        |       |                               |                        |
|  | FIRST PRESENTATION OF MULTIPLE DEPENDENT CLAIM  |   |                                   |                                |                           |                                      |            | X40=                                | -    |                        | OR    | X80=                          |                        |
| • 1  | * If the entry in column 1 is less than the entry in column 2, write "0" in column 3. |   |                                   |                                |                           |                                      |            |                                     |      |                        | OR    | +270=                         |                        |
| •••  | f the "Highest Nu<br>If the "Highest Nu   | mn 1 is less than the<br>mber Previously Pa<br>mber Previously Pa<br>liber Previously Pai | id For IN THIS<br>lid For IN THIS | S SPACE IS                     | s less that<br>s less tha | n 20, enter "20.<br>In 3, enter "3." | ~          | TOTA<br>NDDIT. FE<br>and in the     | E    | ropriate box           |       | TOTAL<br>ADDIT. FEE<br>umn 1. |                        |